	PATENT	RD)	108 25202									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER	
TO	TAL CLAIMS		20		100:0::::			RATE		FEE]]	RATE	FEE
FC)R		NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		1	BASIC FEE		
_	TAL CHARGE	14 minus 20=		• (1			XS 9=		OR	X\$18=	{Oj		
INE	EPENDENT C			• 1			X43=			1	X86=	84	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					740-	\dashv		OR	7,00-	04
								+145:	<u>- 1</u>		OR	+290=	
• 11	the difference	in column 1 is	ess than zero, enter "0" in column 2					TOTA			OR	TOTAL	
SIDDS CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									LE	NTITY	OR	OTHER SMALL	
AMENDMENT A	F 1	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	• 24	Minus	- 26	2	رہ =		X\$ 9=			OR	X\$18=	
	Independent	• 4	Minus	*** 4				X43=		•	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPEN				NDENT CLAIM			+145=	_		OR	+290=	
14-14-17								TOTA			7	TOTAL	
	•	(Column 1)		(Colum	າກ 2່)	(Column 3)	^	ODIT. FE	E L		10.1	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST IER USLY	PRESENT EXTRA		RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	*				X\$ 9=			OR	X\$18=	
	Independent	•	Minus	orie .		= .		X43=	1		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									T		OR	+290=	
									E		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total -	•	Minus	**				X\$ 9=	I		OR	X\$18=	
¥	Independent		Minus	684		2		X43=	十			X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." * ADDITION SEE												·	
	the "Highest Nu	mber Previously Pa ber Previously Paid	id For IN THIS	S SPACE is	less tha	n 3, enter "3."	~	ODIT. FEI d in the a				MDIT. FEE I mm 1.	

Application or Docket Number